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المعرية المتماملة

| PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-875                  |             |              |            |                                  |                    |                             |   |                                      |  | ΝI           | RECORD                                 |                        | Application or Dicket Number |                             |                     |
|---|-------------|--------------|------------|----------------------------------|--------------------|-----------------------------|---|--------------------------------------|--|--------------|--|------------------------|------------------------------|-----------------------------|---------------------|
| CLAIMS AS FILED – PART I (Column 1) (Column 2)                                    |             |              |            |                                  |                    |                             |   |                                      | olumn 2)   |              | SMALL E                                | NTITY                  | OR                           |                             | R THAN<br>ENTITY    |
| FOR   |             |              |            |                                  |                    | ER FILED                    |   | NUMBER EXTRA                         |  |              | RATE                                   | FEE                    |                              | RATE                        | FEE                 |
| BASIC FEE<br>(37 CFR 1.16(a))   |             |              |            |                                  |                    | 7                           |   |                                      |  |              | s 365                                  | OR                     |                              | \$                          |                     |
| TOTAL CLAIMS<br>(37 CFR 1.16(c))  |             |              |            |                                  | 24 minus 20 =      |                             |   |                                      | 4  |              | x \$ 9 =                               | 2)                     | OR                           | × \$=                       |                     |
| INDEPENDENT CLAIMS  |             |              |            |                                  | Ominus 3 =         |                             |   | 13                                   |  |              | x \$ / 0 =                             | de                     |                              |                             |                     |
|   |             |              |            |                                  |                    |                             |   | -                                    |  |              | X \$ / U =                             | 120                    | OR                           | X \$=                       |                     |
| PE  | ENC         | DE           | NT         | CLAIM F                          | PRESE              | NT (                        | 37 CFR  | 1.16(d))                             |  | Į            | + \$=                                  | 17/11                  | OR                           | +\$=                        |                     |
| If the difference in column 1 is less than zero, enter "0" in column 2.           |             |              |            |                                  |                    |                             |   |                                      |  |              | TOTAL                                  | 5//                    | OR                           | TOTAL                       | L                   |
|   | (           | CL           | _AI        | IMS A                            | S AM               | IENDED                      | – PA  | RT II                                |  |              |  |                        |                              |                             |                     |
| (C  |             |              |            |                                  | Column 1)          |                             |   | olumn 2)                             | (Column 3)   |              | SMALL E                                | NTITY                  | OR                           |                             | R THAN<br>ENTITY    |
|   |             |              |            | CLAII<br>REMAII<br>AFTE<br>MENDI | NING<br>ER         |                             | PRE\  | SHEST<br>JMBER<br>VIOUSLY<br>JD, FOR | PRESENT<br>EXTRA   |              | RATE                                   | ADDI-<br>TIONAL<br>FEE |                              | RATE                        | ADD<br>TION<br>FEE  |
| al<br>16  | (c))        |              | ٠          | 2                                | 19                 | Minus                       | "   |                                      | =  |              | x \$=                                  |                        | OR                           | x \$=                       |                     |
| er<br>16  | nt<br>i(b)) |              | ٠          | 6                                | 3                  | Minus                       | ***   | 10                                   | =  | ١            | x \$ =                                 |                        | OR                           | x \$ =                      |                     |
| RE  | SE          | NT           | ATI        | ON OF N                          | <i>I</i> ULTIPI    | _E DEPEND                   | ENT CLA   | AIM (37 CF                           | R 1,16(d))   | ١            | +\$ =                                  |                        | OR                           | +\$ =                       |                     |
| _   |             |              |            |                                  |                    |                             |   | <del>`</del>                         |  | ١            | TOTAL                                  |                        |                              | TOTAL                       |                     |
|   |             |              |            |                                  |                    |                             |   |                                      |  |              | ADD'L FEE                              |                        | OR                           | ADD'L FEE                   |                     |
|   |             |              | (          | (Column                          |                    | Τ΄                          | <del>,                                     </del> | olumn 2)<br>SHEST                    | (Column 3)   | ı            |  |                        | I                            | <u> </u>                    |                     |
|   |             |              |            | REMAIN<br>AFTE<br>MENDA          | NING<br>R          |                             | NU<br>PRE\  | IMBER<br>VIOUSLY<br>ID FOR           | PRESENT<br>EXTRA   |              | RATE                                   | ADDI-<br>TIONAL<br>FEE |                              | RATE                        | ADD<br>TION<br>FEE  |
| al<br>160   | i(c))       |              | •          |                                  |                    | Minus                       | **  | ,                                    | =  | ı            | x \$ =                                 |                        | OR                           | x \$ =                      |                     |
| en  |             |              | *          |                                  |                    | Minus                       | ***   |                                      | =  |              | x s =                                  |                        | OR                           | x \$ =                      |                     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))                   |             |              |            |                                  |                    |                             |   |                                      | 1  |              |  |                        |                              |                             |                     |
| ``  | -00         |              | A11        | 011011                           | AOLIII I           | L DEI CHO                   |   | 401.01                               | 1(1:10(0))   | l            | + \$ =<br>TOTAL                        |                        | OR                           | + \$=<br>TOTAL              |                     |
|   |             |              |            |                                  |                    |                             |   |                                      |  |              | ADD'L FEE                              |                        | OR                           | ADD'L FEE                   |                     |
|   |             | _            | (          | (Column                          |                    |                             | , · ·   | olumn 2)                             | (Column 3)   |              | ·····                                  |                        |                              |                             |                     |
|   |             |              |            | CLAIN<br>REMAIN<br>AFTE<br>MENDN | NING<br>R          |                             | NU<br>PRE\  | SHEST<br>IMBER<br>VIOUSLY<br>ID FOR  | PRESENT<br>EXTRA   |              | RATE                                   | ADDI-<br>TIONAL<br>FEE |                              | RATE                        | ADD<br>TION,<br>FEE |
| al<br>16(   | (c))        |              | ٠          |                                  |                    | Minus                       | **  |                                      | =  |              | x \$ =                                 |                        | OR                           | x \$ =                      |                     |
| ęп  | nt          | ┪            | •          |                                  |                    | Minus                       |   |                                      | =  | Ì            | x \$ =                                 |                        | OR                           | X \$ =                      |                     |
| (37 CFR 1.16(b))  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |             |              |            |                                  |                    |                             |   |                                      | ł  |              |  |                        |                              |                             |                     |
| \C  | JE          | .IN E        | A18        | ON OF N                          | noc i irl          | L DEFEND                    | LIVI OLF  | vi (37 Cr                            | 1.10(0))   | ı            | + \$ =<br>TOTAL<br>ADD'LEFE            |                        | OR<br>OR                     | + \$=<br>TOTAL<br>ADD'L FEE |                     |
| ig<br>gl  | hes<br>hes  | st t<br>st N | Nun<br>Num | nber Prenber Pre                 | evious!<br>evious! | ly Paid For'<br>y Paid For' | IN THE  | IS SPACE<br>S SPACE                  | te "0" in column 3<br>is less than 20, i<br>is less than 3, er | ente<br>ster | TOTAL<br>ADD'L FEE<br>or "20".<br>"3". |                        | Ξ.                           | OR                          | TOTAL               |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.